



Community & Economic Development
 300 East Nine Mile Road
 Ferndale MI 48220
 248.546.2366
 www.ferndalemi.gov

RIGHT-OF-WAY PERMIT APPLICATION

I. LOCATION OF WORK		PERMIT NUMBER:	
ADDRESS			
SUBDIVISION	LOT #	DATE RECEIVED:	
SIDWELL #	ZONING DISTRICT	DATE ISSUED:	
II. IDENTIFICATION			
A. CONTRACTOR/APPLICANT		EMAIL ADDRESS	FAX NO.
NAME		TELEPHONE NO.	
ADDRESS	CITY	STATE	ZIP CODE
24 HOUR EMERGENCY NUMBER			
III. TYPE OF WORK			EST.COST OF ROW WORK \$
<input type="checkbox"/> RESIDENTIAL PROJECT		APPLICATION FEE	\$
<input type="checkbox"/> COMMERCIAL PROJECT		PERMIT FEE	\$
		PLAN REVIEW FEE	\$
TOTAL LINEAR FEET IN ROW		SIZE OF UTILITY	% AERIAL
START DATE		COMPLETION DATE	POLE HEIGHT
IV. WORK TO BE PERFORMED			
V. TYPES OF RESTORATION			
VI. PLAN REVIEW			
<input type="checkbox"/> PLAN SUBMITTED			
<p>ALL ROW AREA MUST BE RESTORED TO ORIGINAL LIKE CONDITION (TEMPORARY RESTORATION ALLOWED WITH CITY APPROVAL).</p> <p>A FORM/COMPACTION INSPECTION IS REQUIRED BEFORE POURING OF CONCRETE/ASPHALT ON CITY PROPERTY.</p> <p>CITY TREES TO BE PROTECTED AND MUST BE REPLACED IF DAMAGED.</p> <p>CALL 248 546-2366 FOR INSPECTION REQUESTS.</p>			
SIGNATURE OF APPLICANT			DATE
PERMIT GRANTED: <input type="checkbox"/> YES <input type="checkbox"/> NO	AUTHORIZED SIGNATURE		DATE